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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/895,402			ing Date 02/2001	☐ To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
FOR			NUMBER FI	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A			N/A		
SEARCH FEE (37 CFR 1.16(k), (f), or (m))			N/A		N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A]	N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 = *				x s =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =]	× \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is:	ets of pap 3250 (\$125 ditional 50	ngs exceed 100 ion size fee due i) for each on thereof. See 7 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		1	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	01/12/2009	CLAIMS REMAINING AFTER AMENDMEN	r	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 25	Minus	20	= 5]	x \$ =		OR	X \$52=	260	
	Independent (37 CFR 1,16(h))	٠6	Minus	3	= 3]	x \$ =		OR	X \$220=	660	
ME	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	920	
(Column 1) (Column 2) (Column 3)												
_⊢		CLAIMS REMAINING AFTER AMENDMEN	r	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16())	*	Minus	**	=]	x s =		OR	x s =		
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	**	=]	x \$ =		OR	x \$ =		
Ш	Application Size Fee (37 CFR 1.16(s))]]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	If the entry in column 1 is less than the entry in column 2, wite 0" in column 3. Legal Instrument Examinier: "If the "Highest Mumber Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN THIS SPACE is less than 5, enter "3".											

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